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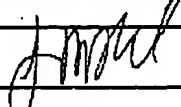
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/840,131	
	Filing Date	6 May 2004	
	First Named Inventor	M. IAMATTEO	
	Group Art Unit	1617	
	Examiner Name	S.M. HUI, Esq.	
Total Number of Pages in This Submission	3	Attorney Docket Number	Lifeline

ENCLOSURES (check all that apply)		
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Remarks _____		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Pharmaceutical Patent Attorneys, LLC 55 Madison Avenue, 4th floor, Morristown NJ 07960-7397 USA
Signature	
Date	see below date

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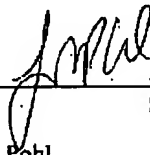
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Inventor : Matthew IAMATTEO
Serial No. : 10/840,131
Patent No. :
Filing Date : 6 May 2004
Title : *Premenstrual Dysphoric Disorder Medication*
Group Art : 1617
Examiner : San Ming HUI, Esq.

5

ELECTION

In response to the 14 July 2005 Restriction Requirement, Applicant here elects Class I
(claims 1 to 8 and 17 to 20).

10 The non-elected claims are process claims that depend from the elected product claims.

Applicant understands that these process claims may be rejoined as of right if presented prior to
final rejection or allowance (e.g., if presented at the present time).

=> Based on today's conference with the Examiner, Applicant understands that the
Examiner will *sua sponte* rejoin these non-elected claims prior to final rejection or allowance.

15 Respectfully submitted,

PHARMACEUTICAL PATENT ATTORNEYS, LLC

/s/

20 By Mark POHL, Reg. No. 35,325

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9 August 2005

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Morristown, NJ 07960-7397 USA

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